

Substance Abuse Treatment Fact Sheet

Opening the Doors to Sobriety

What We Do

The DOC is the largest certified treatment agency in the State of Washington with services in 47 certified facilities located within prisons, work releases, field offices and community justice centers. Treatment services are managed with a structured curriculum to include cognitive behavioral interventions, education, group and individual counseling, Motivational Interviewing, recovery-focused skill building, Therapeutic Communities, correcting criminal thinking errors, relapse prevention and management, gender-specific trauma based therapy, and co-occurring disorders treatment. Entry and completion of treatment services increases the offenders' opportunity for change and reduces the likelihood of recidivism contributing to greater public safety.

Drug offenses make up one of the most common felony crime types committed by offenders currently under DOC jurisdiction. Chemical addictions lead to continued cycling of offenders through halfway houses, community mental health agencies, emergency rooms, and in many cases, back to prison.

Based on the DOC Needs Assessment, approximately 70 percent of offenders under DOC jurisdiction at the end of fiscal year 2013 scored as having a High or Moderate need for Substance Abuse treatment. Providing offenders with needed treatment is part of a broader DOC effort to increase public safety, reduce recidivism, and the need for more prison bed space.

What the Research Says

The Washington State Institute for Public Policy (WSIPP) found that offenders who participate in Substance Abuse (SA) treatment programs have lower recidivism rates than those who did not participate by 4 to 9 percent. With these avoided crimes, there is a monetary savings to the state. WSIPP found that drug treatment in prison saves taxpayers \$10,531 for each inmate who received treatment and \$7,143 for each offender who receives treatment while under community supervision. (["Chemical Dependency Treatment for Offenders: A Review of the Evidence and Benefit-Cost Findings"](#)) A basic comparison of offenders who complete a treatment track and those who start but do not complete a track while under DOC jurisdiction indicates that recidivism rates are lower for those who successfully complete the assigned treatment (page 3 sidebar).



For more information

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Substance Abuse Admissions by Modality and Location

Fiscal Year 2013

Prison:	2,084
IOP	1,671
TC	412
Work Release:	1,644
IOP	609
OP	1,027
RH	8
Community:	7,114
IIP	1,316
IOP	1,794
TC	972
OP	3,027
Total Admissions:	10,842

Completion Rate by Modality and Location

Fiscal Year 2013

Prison:	87.5%
IOP	90.3%
TC	76.7%
Work Release:	57.3%
IOP	55.2%
OP	57.3%
RH	92.9%
Community:	59.5%
IIP	87.1%
IOP	39.9%
TC	78.9%
OP	52.3%
Overall Completion:	64.5%
Total Discharges:	9,376

Treatment Overview

Consistent with evidence-based Best Practices, the Department offers a comprehensive treatment continuum. DOC currently has Substance Abuse treatment available at 20 community based sites, 11 of the state's 12 prisons, and 13 work release locations. Successful treatment consists of the activities listed below:

Integrated Screening

Screening may be court ordered for any felony where the judge finds that substance abuse may have contributed to the crime. Two screening methods are used at both state Reception Centers, the Global Assessment of Individual Needs Short Screener (Gain SS) and the Diagnostic Drug Screening (DDS).

Offenders found to be addicted to chemical substances are referred for treatment in the following priority:

- Drug Offender Sentencing Alternative (DOSA) through the courts, Family and Offender Sentencing Alternative (FOSA), Indeterminate Sentencing Review Board (ISRB) offenders
- Addicted offenders in Hepatitis C Treatment
- Addicted offenders with substance abuse treatment Community Supervision requirement
- High Risk to re-offend - Violent
- High Risk to re-offend – Non-violent
- Moderate Risk to re-offend
- Low Risk to reoffend
- Court ordered to substance abuse treatment

Treatment Services

Treatment services are provided, within available resources, to offenders who meet eligibility criteria established by legislation and DOC policy.

- **Therapeutic Community (TC)** – As an evidenced and phase-based level of care, TC is the most intensive form of treatment available within DOC in both prison facilities and community settings. TC provides a separate living area and a highly structured environment where offenders participate in CD treatment, right living skills, work, and education and where they practice community and personal accountability. The progressive nature of TC requires demonstration of right living prior to promotion to the next phase of treatment. Treatment teams include CD professionals, mental health staff, medical services staff, custody officers, classification counselors and site administrators.
- **Recovery House (RH)** – RH is the continuation of TC in the community. This modality was phased out at the start of fiscal year 2013.
- **Intensive Inpatient (IIP)** – IIP is a highly structured residential treatment that is based in the community. It is similar to TC, but requires more hours per week and has a shorter duration.



Assessment of Severe Mental Health upon Substance Abuse Admission

Fiscal Year 2013

2008.....	11.7%
2009.....	10.6%
2010.....	10.5%
2011.....	14.2%
2012.....	13.6%
2013.....	10.2%

Assessment of Severe Mental Health upon Substance Abuse Admission

Offenders Released from Prison in FY 2010

	<u>Completed Track†</u>	<u>Did Not Comp</u>
High Need Track (TC, OP)		
1 Year	9%	18.4%
2 Year	17.5%	25.6%
3 Year	10.5%	12.7%
Total 3 Year	37.0%	56.7%

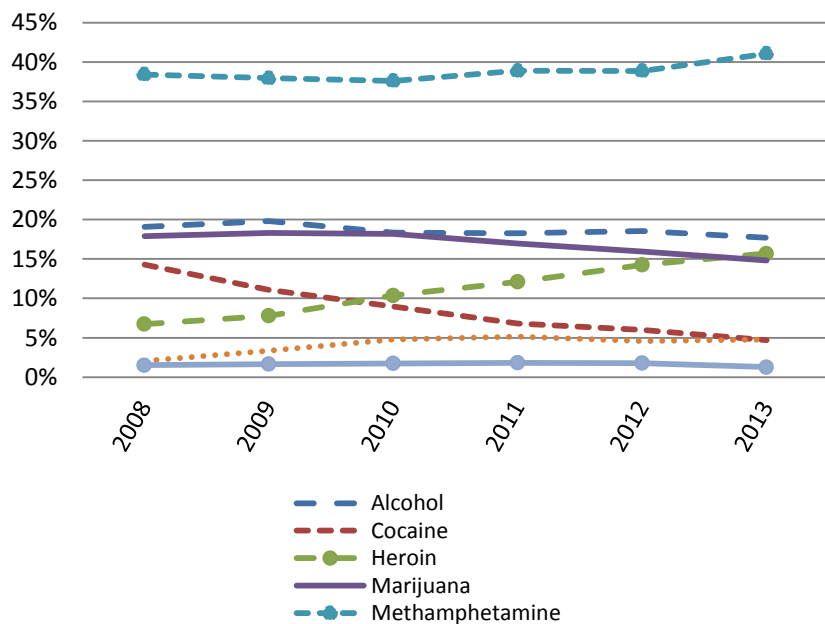
Mod/High Need Track (IIP, IOP, OP)		
1 Year	9.2%	16.0%
2 Year	15.4%	18.2%
3 Year	13.8%	11.0%
Total 3 Year	38.5%	45.2%

Moderate Need Track (IOP, OP)		
1 Year	7.2%	17.3%
2 Year	11.8%	17.6%
3 Year	7.3%	11.0%
Total 3 Year	26.2%	45.9%

†Completed all recommended levels of treatment in the track based on the offender's assessed level of SA need (High, Mod/High, or Mod) while under DOC jurisdiction in prison and the community.

- **Intensive Day Treatment (IDT)** - Meets five days a week for 16 weeks in a prison setting. It offers anger management, vocational skills, parenting education, criminogenic needs education, and chemical dependency. IDT is designed to target specific populations – veterans, domestic violence perpetrators, DUI offenders, and offenders who have participated in Hepatitis C treatment.
- **More Offender Resources and Education (MORE)** – In collaboration with substance abuse and education providers, community offenders attend services four days per week, spending part of the day participating in SA classes and the other part in additional programs that include vocational skills, parenting education, GED and other support programs to assist in the re-entry of High Needs/Risk offenders.
- **Intensive Outpatient (IOP)** – This is a highly structured intervention delivered in a day treatment environment. Programs are available in prison, work release, and the community.
- **Outpatient (OP)** – All offenders completing prison-based treatment are transitioned to a community OP program. Others may be admitted directly from the community after completing either IIP or IOP. The duration of OP care is a minimum of three months and frequency of care is at least weekly, and is based on the American Society of Addiction Medicine (ASAM) criteria for each offender.
- **Co-occurring Disorder (COD) Treatments** – Modified TC, IOP, and OP treatments are available for offenders who have significant mental health diagnoses and addiction. These treatments are modified in duration, intensity, and progression while incorporating mental health and addiction treatment, which has proven to benefit COD offenders.

Primary Substance Reported by Offenders



Footnote Data reflects self-reported drug preference upon admission to SA treatment by fiscal year. Source: TARGET System.

Offenders Admitted to Substance Abuse Treatment on State Aid

Fiscal Year 2013

Social Security Income	2.2%
Temporary Assistance for Needy Families	1.1%
General Assistance.....	1.8%
Medicaid	0.6%
ADATSA*	0.3%
Other.....	0.1%

*Alcohol and Drug Addiction Treatment and Support Act

Please forward comments and questions to dawn.williams@doc.wa.gov

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Case Management and Transitional Treatment Services

For those offenders releasing to an area where DOC does not directly provide treatment, they may access continuing treatment through established DOC contract vendors. Per DOC policy 420.380, drug testing is an integral part of SA treatment and supports both recovery and community safety through its dual purpose of deterrence and accountability.

Summary

All DOC treatment programs employ evidence-based Best practices consistent with the federal Treatment Improvement Protocol (TIP) guidelines. Treatment services adhere to criteria within available resources. DOC treatment follows the bio-psycho-social based model of addiction and recovery and simultaneously encourages participation in self-help groups. The curriculum used by DOC was developed by the Department Clinical Team in conjunction with the GAIN Institute, Terrance Gorski CENAPS Corporation, National Curriculum Training Institute, The Change Company, CiviGenics, Spectrum Health Systems, and the National Development Research Institute.

Substance Abuse Treatment Facilities

Correction Centers (CC)

- Airway Heights CC
 - IDT
 - IOP
 - IOP-COD
- Cedar Creek CC
 - IOP
- Coyote Ridge CC
 - IOP
- Larch CC
 - IOP
- Monroe CC
 - TC-COD
 - IOP
- Mission Creek CC for Women
 - TC
 - IOP
- Olympic CC
 - TC
- Stafford Creek CC
 - IOP
- Washington CC
 - IOP
- Washington CC for Women
 - IOP
- Washington State Penitentiary
 - IOP
 - IOP-COD

Field Offices (FO) and Community

Justice Centers (CJC)

By Modalities Available

- IOP and OP
 - Bellingham FO (+OP-COD)
 - Burien FO
 - Bremerton FO
 - Chehalis FO
 - Everett CJC (+OP-COD, MORE)
 - Lacey FO (+OP-COD)
 - Longview FO
 - Lynnwood FO
 - Marysville FO
 - Montesano FO
 - Moses Lake FO
 - Mount Vernon FO
 - Parkland FO
 - Port Orchard FO
 - Seattle CJC (+OP-COD, MORE)
 - Shelton FO
 - Spokane CJC (+IOP/OP-COD)
 - Tacoma CJC (+OP-COD)
 - Vancouver CJC
 - Vancouver East FO
 - Wenatchee FO
 - Yakima CJC

Work Releases (WR)

By Modalities Available

- IOP and OP
 - Ahtanum View WR
 - Bishop Lewis WR
 - Madison Inn WR
 - Olympia WR
 - Progress House WR
 - Peninsula WR
 - Reynolds WR
 - Tri-Cities WR
 - RAP House/Lincoln WR (COD)
- OP Only
 - Brownstone WR
 - Eleanor Chase WR
 - Helen B. Ratcliff WR
- IOP Only
 - Longview WR